

County: Dunn  
 AMERICAN LUTHERAN - MENOMONIE UNIT  
 915 ELM AVENUE

Facility ID: 1070

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MENOMONIE 54751 Phone: (715) 235-9041  
 Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/02): 60  
 Total Licensed Bed Capacity (12/31/02): 60  
 Number of Residents on 12/31/02: 56

Ownership: Nonprofit Church/Corporation  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 51

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)			%
			Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No						44.6			
Supp. Home Care-Personal Care	No						46.4			
Supp. Home Care-Household Services	No		Developmental Disabilities	0.0	Under 65	3.6	More Than 4 Years			8.9
Day Services	No		Mental Illness (Org./Psy)	14.3	65 - 74	14.3				-----
Respite Care	No		Mental Illness (Other)	8.9	75 - 84	25.0				100.0
Adult Day Care	No		Alcohol & Other Drug Abuse	0.0	85 - 94	41.1	*****			
Adult Day Health Care	No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	16.1	Full-Time Equivalent			
Congregate Meals	Yes		Cancer	1.8		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No		Fractures	3.6		100.0	(12/31/02)			
Other Meals	Yes		Cardiovascular	21.4	65 & Over	96.4	-----			
Transportation	No		Cerebrovascular	17.9		-----	RNs			16.1
Referral Service	No		Diabetes	0.0	Sex	%	LPNs			5.6
Other Services	No		Respiratory	3.6	-----	-----	Nursing Assistants,			
Provide Day Programming for			Other Medical Conditions	28.6	Male	28.6	Aides, & Orderlies			
Mentally Ill	No			-----	Female	71.4				
Provide Day Programming for				100.0		-----				
Developmentally Disabled	No					100.0				

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#### Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	15	100.0	281			23	79.3	102	0	0.0	0	10	83.3	133	0	0.0	0	0	0.0	0	48	85.7
Intermediate	---	---	---			6	20.7	85	0	0.0	0	2	16.7	121	0	0.0	0	0	0.0	0	8	14.3
Limited Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	15	100.0				29	100.0		0	0.0		12	100.0		0	0.0		0	0.0		56	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02			
		-----			
Percent Admissions from:		Activities of		% Needing Assistance of	Total
		Daily Living (ADL)		One Or Two Staff	Number of Residents
				%	
Private Home/No Home Health	9.8	Bathing	Independent	1.8	56
Private Home/With Home Health	1.6	Dressing		78.6	19.6
Other Nursing Homes	0.0	Transferring		71.4	12.5
Acute Care Hospitals	72.4	Toilet Use		46.4	14.3
Psych. Hosp.-MR/DD Facilities	0.0	Eating		53.6	17.9
Rehabilitation Hospitals	0.0			39.3	7.1
Other Locations	16.3				56
Total Number of Admissions	123	*****			
Percent Discharges To:		Continence	%	Special Treatments	%
Private Home/No Home Health	13.1	Indwelling Or External Catheter	8.9	Receiving Respiratory Care	10.7
Private Home/With Home Health	14.8	Occ/Freq. Incontinent of Bladder	37.5	Receiving Tracheostomy Care	0.0
Other Nursing Homes	4.9	Occ/Freq. Incontinent of Bowel	23.2	Receiving Suctioning	0.0
Acute Care Hospitals	26.2	Mobility		Receiving Ostomy Care	1.8
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	7.1	Receiving Tube Feeding	3.6
Rehabilitation Hospitals	0.0			Receiving Mechanically Altered Diets	12.5
Other Locations	14.8	Skin Care		Other Resident Characteristics	
Deaths	26.2	With Pressure Sores	3.6	Have Advance Directives	87.5
Total Number of Discharges		With Rashes	5.4	Medications	
(Including Deaths)	122			Receiving Psychoactive Drugs	55.4

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Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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	This Facility	Ownership: Nonprofit	Bed Size: 50-99	Licensure: Skilled	All Facilities				
	%	Peer Group	Peer Group	Peer Group	Peer Group	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	81.6	86.5	0.94	83.5	0.98	83.3	0.98	85.1	0.96
Current Residents from In-County	94.6	79.3	1.19	72.9	1.30	75.8	1.25	76.6	1.23
Admissions from In-County, Still Residing	17.9	23.9	0.75	22.2	0.81	22.0	0.81	20.3	0.88
Admissions/Average Daily Census	241.2	107.3	2.25	110.2	2.19	118.1	2.04	133.4	1.81
Discharges/Average Daily Census	239.2	110.2	2.17	112.5	2.13	120.6	1.98	135.3	1.77
Discharges To Private Residence/Average Daily Census	66.7	41.6	1.60	44.5	1.50	49.9	1.34	56.6	1.18
Residents Receiving Skilled Care	85.7	93.2	0.92	93.5	0.92	93.5	0.92	86.3	0.99
Residents Aged 65 and Older	96.4	95.7	1.01	93.5	1.03	93.8	1.03	87.7	1.10
Title 19 (Medicaid) Funded Residents	51.8	69.2	0.75	67.1	0.77	70.5	0.73	67.5	0.77
Private Pay Funded Residents	21.4	22.6	0.95	21.5	0.99	19.3	1.11	21.0	1.02
Developmentally Disabled Residents	0.0	0.6	0.00	0.7	0.00	0.7	0.00	7.1	0.00
Mentally Ill Residents	23.2	35.9	0.65	39.0	0.60	37.7	0.62	33.3	0.70
General Medical Service Residents	28.6	18.1	1.58	17.6	1.62	18.1	1.58	20.5	1.39
Impaired ADL (Mean)	43.2	48.7	0.89	46.9	0.92	47.5	0.91	49.3	0.88
Psychological Problems	55.4	52.0	1.06	54.6	1.01	52.9	1.05	54.0	1.03
Nursing Care Required (Mean)	4.7	6.8	0.69	6.8	0.69	6.8	0.69	7.2	0.65